

## REQUEST FOR EXTENDED ACTIVE DUTY

NOTE: Submit in duplicate through official channels

LAST NAME - FIRST NAME - MIDDLE INITIAL	SSN	RATE
NAME AND LOCATION OF ORGANIZED UNIT TO WHICH ATTACHED <i>(If applicable)</i>		DATE OF CURRENT ENLISTMENT
		DATE ASSIGNED TO ORGANIZED UNIT

- I hereby request active service and training pursuant to Section 4(c)(2) of the Universal Military Training and Service Act for a period of 24 months, unless sooner released by the Commandant of the Coast Guard. To commence \_\_\_\_\_, \_\_\_\_\_, or \_\_\_\_\_.
- It is understood that acceptance of this application will create a binding agreement on my part to serve 24 months on extended active duty in the Coast Guard unless sooner released by the Commandant.
- If necessary, I agree to extend my enlistment in the Coast Guard Reserve for one or two full years in order to allow an active duty period of 24 months.
- I understand that, in order to be considered for assignment to advanced training, I may have to extend my period of active duty service in order to comply with the provisions of current instructions.

REASON FOR REQUEST

### SUMMARY OF MILITARY SERVICE PRIOR TO CURRENT ENLISTMENT *(If none, so state)*

ACTIVE SERVICE			INACTIVE SERVICE		
BRANCH OF SERVICE	FROM (Mo.-day-yr.)	TO (Mo.-day-yr.)	BRANCH OF SERVICE	FROM (Mo.-day-yr.)	TO (Mo.-day-yr.)

DATE	SIGNATURE
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### FIRST ENDORSEMENT

From: Commanding Officer,

### SECOND ENDORSEMENT

From: Commander, CG District (r)